CALIFORNIA STATE DEPARTMENT OF PUBLIC HEALTH

J. D. DUNSHEE, M.D., Director

Weekly Bulletin

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Mothers' Lives Must Be Saved

We are so used to hearing everybody talk about saving the babies and lowering the mortality rate from the diseases of infancy, that we sometimes forget that the babies' mothers are important. Babies *are* important. But mothers are important *too*. They also have a right to life and health and happiness.

In the days of our ancestors, when motherhood was taken for granted and when child bearing might be attended by peculiar and unpredictable complications of which no one knew the cause, and to which no one knew the answer, there was some excuse for accidents. But that day has gone. We know now how mothers should be taken care of, before and after the baby's birth; we know what causes their attendant difficulties, and what should be done about them.

In the United States during 1933 approximately 13,000 women died during the puerperal state, 129 of these in Connecticut. Why must this annual toll of life go on? If the loss were inevitable and due to a fate which we could not comprehend, there would be very little use in considering what we could do to remedy it, but the fact is we know very largely the causes of maternal death and the methods of preventing it.

If this be true, it is important to know what precautions can be taken and what lines may be followed to make prevention a fact. To do this three points must be established: (1) We must know the nature of the accident, (2) the way to circumvent it, (3) we must find ways to get this knowledge to expectant mothers.

The persons most concerned—the mothers and the fathers—themselves often do not know their rights—what they have a right to expect of their doctors, their nurses, their hospitals. The most important help must come from the women themselves. Mothers must realize the importance of prenatal care for themselves. They must learn to overcome their old prejudices and secrecy, and themselves seek medical advice early in pregnancy. Statistics show that many of the women who die in childbirth have had little or no prenatal care and deaths are often caused by conditions which, if found early enough, might have been cared for and the life of the mother saved.

Every prospective mother must be taught the value of proper prenatal care, of being watched by a competent physician, of periodic check-ups, of the diet that will strengthen her and her child, and of the necessity of rest. She must learn the kind of care she should have when the child is born, and afterward. The father, too, must know what is essential for the health of his wife and child, and perhaps for their lives. To assist in this the State Department of Health sends a series of prenatal letters to any prospective mother who requests them, either personally or through her physician.

Maternal mortality is one of the most difficult problems we have to face and yet it is one of the vital

problems that confronts our civilization. Last year, in Connecticut, more than five women died of every thousand who gave birth to living babies.

Health workers do not sit smugly by and say the death of five or six mothers for every one thousand children born alive is not so very bad after all. On the contrary they find this apparently small number very disturbing. Five mothers out of a thousand does not sound so many—but it is probably at least double what it should be. The loss of even one life that might be saved is an irreparable tragedy. Motherhood, the greatest profession in the world, must be protected. When mothers are themselves convinced of the need of medical care, then and then only will the loss of mothers be reduced.

Every baby has a right to its mother's love. Every mother has a right to live for her baby. There is no sadder sight than a little child in a motherless home, and no more tragic home than one that does not know the beauty that comes from a mother among her children.—Connecticut Health Bulletin.

IS ALUMINUM POISONOUS?

The wide distribution of scare literature, suggesting that the use of aluminum utensils is likely to prove injurious, has been brought to our attention. We were under the impression that the question of toxicity in foods because of their preparation in aluminum vessels had long been settled. Some of the false statements are: Aluminum is destructive of life; aluminum is not a normal constituent of living tissue; aluminum is a rare and poisonous metal; aluminum utensils are rapidly dissolved by food stuffs during cooking; aluminum in the diet causes sterility; the use of aluminum utensils is provocation of cancer; traces of aluminum produce what is commonly known as ptomaine or food poisoning; aluminum is a narcotic acid poison; cooking in aluminum destroys nutritive and health protective constituents of food stuffs; and so forth. Most of these statements are based upon ignorance, since there is no evidence to support the contention that aluminum is poisonous or causes disease. There is no scientific evidence to show that aluminum in the ordinary cooking operations of every day practice is so strongly attacked as to produce an objectionable amount of soluble salts. The U. S. Bureau of Standards Circular 346 (1927) states: "There is no evidence available which would indicate that aluminum cooking utensils represent a potential danger to health."

After an exhaustive nutritional and chemical study on the use of aluminum utensils in cooking, the German Ministry of Health published the following statement: "Damages of any kind to health or even disturbances of well being did not make themselves evident." Another German scientific journal states: "The use of aluminum for plant and vessels in the food industry is eminently suitable. The quantities of aluminum which are dissolved are physiologically perfectly harmless."

Aluminum is a natural constituent of ordinary water and of most foods, though present only in traces. A quart of milk, for example, contains one-twelfth of a grain of aluminum, and a loaf of bread about one-sixth of a grain. Lettuce contains 29.6 parts of aluminum per million parts, beef 13.9, and fried eggs 12.4. It is obvious that regardless of the type of vessel in which food is cooked, we are all ingesting some aluminum from our diet, in common with iron, calcium, and other salts, and it is reasonable to conclude that it plays some role in human nutrition and metabolism.

The British *Lancet* of May, 1931, made the following statement in regard to cancer: "There is no reliable evidence experimental, statistical, or clinical which would indicate a casual correlation between cancer and the absence or presence, or the excess of any dietary constituent. Sensational statements to the contrary are unfounded and ill considered and only serve to alarm the public."

Experiments by competent scientists have demonstrated conclusively that aluminum does not affect the vitamins in foods.

In the United States the amount of aluminum in the organs of man varies with the locality, depending on diet, water supply, and soil content. The amount increases with advancing age but there is no correlation between the aluminum and the hardening of the arteries. Practically all scientific men agree that there is no more likelihood of producing organic diseases or food poisoning by the use of aluminum vessels than by those of any other sort.—Oregon State Board of Health Bulletin.

Anybody may have personality. All that is necessary is a quality or a defect sufficient to dominate the mental faculties, which exists in an uncommon form in juxtaposition to the common form of other individuals.—H. Laurent.

To me it seems as if when God conceived the world, that was poetry; He formed it, and that was sculpture; He varied and colored it, and that was painting; and then, crowning all, He peopled it with living beings, and that was the grand, divine, eternal drama.—Charlotte Cushman.

LOS ANGELES COUNTY HEALTH OFFICER HONORED

Celebrating the twentieth anniversary of Dr. J. L. Pomeroy as first full time county health officer of Los Angeles, over 500 officials, friends and employees of the county health department assembled for a dinner dance at the Oakmont Country Club in Montrose, on the evening of April 25th.

Dr. William P. Shepard of the Metropolitan Life Insurance Company at San Francisco acted as Toastmaster, and guest speakers of the evening were Dr. Walter Brown of Palo Alto, president-elect of the American Public Health Association and president of the western branch of that organization; Dr. J. D. Dunshee, Director of the State Department of Public Health; Los Angeles County Supervisor John Anson Ford, and several other public health minded persons of prominence gave a few laudatory remarks in honor of Dr. Pomeroy.

In recognition of Dr. Pomeroy's twentieth milestone in the service of the department, the County Health Associates, an organization comprising the personnel of the health department, caused to be made a gold service button bearing the emblem of medical science, the caduceus, which Supervisor Ford presented to the honored guest in behalf of the Associates.

Dr. Pomeroy was further honored with the bestowal of the rank of Kentucky Colonel on the staff of Governor Ruby Laffoon, presented by Dr. J. M. Furstman, Monrovia district health officer, who was chairman of the meeting.

Acknowledging the courtesies paid him, Dr. Pomeroy replied in brief, outlining some of the accomplishments of the department: the building up of a one-man organization to a staff of some 400 persons; the securing of contracts for health services with thirty-six incorporated cities in Los Angeles County, and the erection of our twelve beautiful and modern health centers, strategically located throughout the county, as well as numerous effective ordinances and other regulations.

During the twenty years of service, about ten millions of dollars were expended with a net saving to the taxpayers of over one hundred thirty-seven millions of dollars in the reduction of case and death rates from communicable diseases and in reduced infant mortality. This is a return of one thousand three hundred seventy per cent on the twenty-year investment.

In closing Dr. Pomeroy stated that the results obtained were possible only through the wholehearted support of the county board of supervisors and other public officials, and the splendid spirit of teamwork and efficiency of the health department staff. To the people of Los Angeles County he paid tribute because of their continued interest in promoting public health.

QUADRUPLETS IN THE UNITED STATES

In the period 1915–1931 (since establishment of the U. S. Registration Area), there have been 50 sets of quadruplets registered, distributed as follows:

Alabama	2	Mississippi	2
Arkansas	1	Missouri	2
California	3	New Jersey	1
Connecticut	1	New York	1
Illinois	1	North Carolina	3
Indiana	2	Ohio	3
Kansas	1	Pennsylvania	6
Kentucky	2	South Carolina	1
Louisiana	1	Tennessee	1
Maryland	1	Utah	1
Massachusetts	2	Virginia	4
Maine	1	West Virginia	2
Michigan	2	Wisconsin	1
Minnesota	1	Wyoming	1

They are distributed by years as follows:

1916	2	1925	5
1919	1	1926	3
1920	6	1927	6
1921	1	1928	3
1922	4	1929	3
1923	3	1930	7
1924	4	1931	2

Three states recorded two sets of quadruplets in one year, Pennsylvania in 1922, Ohio in 1920 and Virginia in 1927 and again in 1930.

Pennsylvania has recorded births of quadruplets in five different years (1916, 1919, 1920, 1922 (2) and 1926); California (1920, 1922, 1923) and North Carolina (1924, 1925, 1930) in three different years; Alabama (1927, 1929), Indiana (1924, 1925), Kentucky (1922, 1928), Massachusetts (1926, 1928), Michigan (1916, 1930), Mississippi (1924, 1931), Missouri (1928, 1931), Ohio (1920 (2), 1925) Virginia (1927, (2), 1930 (2)), and West Virginia (1925, 1930) in two different years each.

Of the 50 sets, 31 had all the children born alive, 6 had three of them live births, while there were 3 each with two and one liveborn children, and seven cases in which all four children were still-born; 15 sets were made up of males only, while there were only ten sets entirely of females; 6 sets were composed of 3 males and 1 female; 11 sets 2 males and 2 females, and 8 sets 1 male and 3 females. In the entire 50 sets, 108 were males and 92 were females.

Where all the children were living at birth, 10 sets were all males; 5 sets were all females; 5 sets were 2 males, 2 females; 4 sets, 3 males, 1 female; 7 sets, 1 male, 3 females.

Where all were stillborn, there was 1 set all females, 1 set, 1 male, 3 females, 3 sets, 2 males, 2 females, and 2 sets, 3 males, 1 female.

MORBIDITY

Complete Reports for Following Diseases for Week Ending May 4, 1935

Chickenpox

1110 cases: Alameda 16, Albany 18, Berkeley 48, Oakland 138, San Leandro 1, Contra Costa County 3, Pittsburg 6, Fresno County 5, Fresno 7, Imperial County 6, Bishop 5, Kern County 13, Bakersfield 1, Taft 2, Kings County 6, Hanford 1, Lemoore 3, Susanville 1, Los Angeles County 46, Alhambra 4, Arcadia 4, Beverly Hills 33, Burbank 2, Claremont 2, Compton 14, Culver City 13, Glendale 24, Huntington Park 1, Inglewood 1, La Verne 1, Long Beach 12, Los Angeles 139, Manhattan 14, Pasadena 13, Pomona 21, San Gabriel 1, Santa Monica 3, Sierra Madre 7, Whittier 4, Torrance 3, Lynwood 1, South Gate 2, Signal Hill 1, Bell 1, Gardena 1, Madera County 1, Madera 4, Merced County 5, St. Helena 1, Orange County 4, Brea 3, Huntington Beach 7, Santa Ana 7, Laguna Beach 1, Riverside County 29, Hemet 1, Riverside 6, Sacramento County 10, Sacramento 33, Redlands 3, San Diego County 1, San Diego 60, San Francisco 158, San Joaquin County 12, Stockton 18, San Luis Obispo County 1, San Mateo County 1, Burlingame 12, Daly City 8, Hillsborough 1, Redwood City 2, San Mateo 1, Lompoc 1, Santa Barbara 3, Santa Maria 3, Santa Clara County 1, Palo Alto 14, San Jose 8, Sunnyvale 1, Willow Glen 3, Santa Cruz County 2, Santa Cruz 1, Vacaville 4, Vallejo 1, Healdsburg 1, Stanislaus County 6, Ceres 7, Newman 1, Turlock 1, Tulare County 3, Ventura County 3, Fillmore 3, Santa Paula 1, Yolo County 2, Woodland 1, Marysville 1.

Diphtheria

26 cases: Berkeley 1, Los Angeles County 2, Los Angeles 7, Santa Ana 2, Riverside County 3, Sacramento County 1, Redlands 1, San Francisco 3, Tulare County 1, Ventura County 1, Santa Paula 4.

German Measles

999 cases: Alameda County 1, Alameda 2, Berkeley 7, Hayward 1, Oakland 80, San Leandro 4, Chico 1, Contra Costa County 24, Placerville 1, Fresno County 39, Fresno 4, Kern County 1, Lassen County 1, Los Angeles County 49, Alhambra 2, Beverly Hills 1, Compton 3, Culver City 1, Glendale 2, Huntington Park 6, Inglewood 1, Long Beach 27, Los Angeles 130, Manhattan 1, Montebello 3, Pasadena 28, Pomona 5, Santa Monica 3, Vernon 2, Whittier 12, Torrance 11, West Covina 1, South Gate 5, Monterey Park 3, Bell 2, Madera 1, Ross 1, San Anselmo 1, San Rafael 4, Merced County 1, Monterey County 4, Orange County 12, Santa Ana 9, Laguna Beach 1, Riverside County 1, Beaumont 14, Riverside 1, Sacramento County 3, Sacramento 9, Ontario 3, Redlands 1, San Diego County 20, La Mesa 10, National City 7, San Diego 60, San Francisco 179, San Joaquin County 3, Stockton 6, Arroyo Grande 1, Paso Robles 5, Burlingame 7, Daly City 3, Redwood City 2, San Mateo 2, Menlo Park 1, Santa Barbara County 2, Lompoc 2, Santa Barbara 1, Santa Clara County 16, Los Gatos 3, Mountain View 4, Palo Alto 10, San Jose 77, Sunnyvale 2, Willow Glen 7, Shasta County 2, Redding 1, Stanislaus County 2, Trinity County 1, Ventura County 22, Oxnard 1, Yolo County 10.

Influenza

48 cases: Kern County 4, Bakersfield 1, Los Angeles County 7, Burbank 1, Glendale 4, Los Angeles 28, Manhattan 1, Monrovia 1, Santa Monica 1.

Malaria

5 cases: Alameda County 1, Los Angeles 1, South Gate 1, Santa Ana 2.

Measles

1731 cases: Alameda County 31, Berkeley 47, Oakland 55, Butte County 1, Chico 4, Calaveras County 4, Colusa 2, Contra Costa County 3, Antioch 6, Concord 2, Pittsburg 9, Richmond 1, El Dorado County 2, Placerville 2, Fresno County 24, Fresno 65, Kern County 206, Bakersfield 6, Taft 1, Kings County 17, Hanford 3, Lemoore 10, Los Angeles County 11, Alhambra 3, Beverly Hills 3, Burbank 7, Covina 1, Glendale 13, La Verne 1, Long Beach 108, Los Angeles 61, Monrovia 1, Montebello 25, Pasadena 2, Pomona 9, Redondo 1, Santa Monica 2, Whittier 1, Torrance 3, Lynwood 1, South Gate 1, Signal Hill 1, Gardena 1, Madera County 36, Madera 1, Merced County 43, Gustine 4, Los Banos 7, Merced 1, Monterey County 2, Orange County 29, Anaheim 6, Brea 28, Fullerton 43, Orange 17, Santa Ana 53, La Habra 12, Placentia 6, Riverside County 2, Beaumont 8, Corona 1, Hemet 1, Riverside 3, Sacramento County 26, Sacramento 226, San Benito County 9, San Diego 7, San Francisco 53, San Joaquin County 55, Lodi 3, Manteca 10, Stockton 13, Tracy 3, San Luis Obispo County 17, Arroyo Grande 2, Paso Robles 5, San Mateo County 1, Burlingame 3, Redwood City 3, San Mateo 4, Atherton 1, Menlo Park 1, Santa Barbara County 8, Lompoc 2, Santa Maria 5, Santa Clara County 3, Gilroy 2, Los Gatos 1, Palo Alto 12, San Jose 41, Willow Glen 2, Santa Cruz County 22, Watsonville 11, Siskiyou County 4, Suisun 3, Stanislaus County 34, Ceres 20, Modesto 1, Newman 16, Turlock 11, Trinity County 7, Tulare County 3, Lindsay 4, Tuolumne County 1, Ventura County 2, Yolo County 12, Woodland 2.

Mumps

375 cases: Alameda County 14, Alameda 9, Berkeley 2, Hayward 5, Oakland 64, San Leandro 9, Sutter Creek 3, Calaveras County 3, Contra Costa County 3, Antioch 1, Fresno County 1, Fresno 3, Kern County 21, Kings County 1, Los Angeles County 1, Burbank 20, Culver City 7, Huntington Park 1, Long Beach 2, Los Angeles 22, Monrovia 1, San Fernando 4, Santa Monica 2, Marin County 1, Ross 1, San Rafael 1, Merced County 10, Orange County 3, Anaheim 1, Plumas County 3, Riverside County 9, Beaumont 1, Corona 2, Sacramento County 2, Sacramento 19, San Diego 4, San Francisco 17, San Joaquin County 22, Lodi 3, Stockton 7, San Luis Obispo County 3, Arroyo Grande 3, Hillsborough 1, Santa Barbara County 4, Lompoc 1, Santa Maria 2, Santa Clara County 3, San Jose 1, Willow Glen 1, Tulare County 13, Lindsay 10, Yolo County 18, Woodland 9, California 1.*

Pneumonia (Lobar)

69 cases: Alameda 1, Oakland 2, Butte County 1, Imperial County 1, Kern County 1, Los Angeles County 3, Glendale 1, Glendora 1, Long Beach 1, Los Angeles 38, Redondo 1, Orange County 1, Santa Ana 1, Corona 1, Sacramento 1, San Diego 3, San Francisco 6, Manteca 1, Stockton 2, San Jose 1, Redding 1.

Scarlet Fever

322 cases: Alameda County 1, Alameda 4, Berkeley 3, Hayward 1, Oakland 6, Contra Costa County 1, Placerville 2, Fresno County 3, Imperial County 2, Holtville 1, Kern County 2, Kings County 1, Hanford 2, Lassen County 1, Los Angeles County 13, Alhambra 1, Azusa 1, Burbank 1, Huntington Park 1, La Verne 1, Long Beach 2, Los Angeles 52, Pasadena 2, Pomona 2, Redondo 1, San Fernando 7, Santa Monica 1, Vernon 1, Maywood 1, Merced County 1, Los Banos 3, Monterey County 1, St. Helena 1, Orange County 1, Anaheim 1, Placentia 1, Placer County 102, Auburn 3, Riverside County 2, Beaumont 2, Sacramento County 7, Sacramento 12, San Diego 16, San Francisco 22, San Joaquin County 2, Lodi 1, Stockton 2, Redwood City 1, Santa Barbara 1, Santa Clara County 1, Palo Alto 2, San Jose 9, Tulare County 2, Tuolumne County 4, Yolo County 1, Woodland 1, Yuba County 3.

Smallpox

21 cases: Los Angeles 13, Sacramento 3, Watsonville 5.

Typhoid Fever

9 cases: Imperial County 5, Kings County 1, Los Angeles 1, Merced County 1, San Francisco 1.

Whooping Cough

209 cases: Berkeley 7, Oakland 4, Contra Costa County 2, Fresno County 2, Kern County 3, Los Angeles County 8, Alhambra 3, Burbank 2, Glendale 8, Long Beach 3, Los Angeles 15, Santa Monica 1, Torrance 4, Lynwood 1, Monterey Park 1, Chowchilla 2, Larkspur 1, Orange County 1, Huntington Beach 5, Santa Ana 6, Corona 1, Sacramento 4, San Diego County 2, National City 17, San Diego 11, San Francisco 40, San Joaquin County 8, Stockton 7, Paso Robles 2, San Luis Obispo 2, South San Francisco 1, Santa Barbara County 3, Santa Barbara 7, Santa Clara County 8, Palo Alto 8, San Jose 1, Sunnyvale 3, Willow Glen 4, Tulare County 1.

Meningitis (Epidemic)

8 cases: Oakland 1, Gridley 1, Fresno County 1, Kern County 1, Los Angeles 3, Sacramento County 1.

Dysentery (Amoebic)

One case: From the Orient, reported by San Francisco.

Dysentery (Bacillary)

3 cases: Los Angeles 2, San Jose 1.

Ophthalmia Neonatorum

One case: Santa Barbara.

Pellagra

2 cases: San Francisco 1, Tulare County 1.

Poliomyelitis

3 cases: Redondo 1, Chowchilla 1, San Francisco 1.

Tetanus

One case: Ontario.

Trachoma

4 cases: Los Angeles County 2, Alhambra 1, Monrovia 1.

Encephalitis (Epidemic)

3 cases: Oakland 2, San Francisco 1.

Paratyphoid Fever

One case: Burlingame.

Trichinosis

4 cases: San Francisco.

Food Poisoning

2 cases: San Joaquin County.

Undulant Fever

3 cases: Fresno 1, Los Angeles County 1, Burbank 1.

Coccidioidal Granuloma

One case: San Francisco.

Septic Sore Throat (Epidemic)

2 cases: Larkspur 1, San Francisco 1.

Rabies (Animal)

18 cases: El Centro 1, Los Angeles County 4, Los Angeles 6, Pasadena 1, Hollister 1, San Diego 2, San Joaquin County 2, Stockton 1.

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* Cases charged to "California" represent patients ill before entering the state or those who contracted their illness traveling about the state throughout the incubation period of the disease. These cases are not chargeable to any one locality.

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